



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

September 27, 2022

Andrea Flood  
Frankenmuth Glen ALC, LLC  
3520 Davenport Avenue  
Saginaw, MI 48602

RE: License #: AH730394860  
Covenant Glen Memory Care  
1130 Covenant Drive  
Frankenmuth, MI 48734

Dear Ms. Flood:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. Your license is renewed. It is valid only at your present address and is nontransferable.

Please review the enclosed documentation for accuracy and contact me with any questions. If I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Aaron L. Clum".

Aaron Clum, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(517) 230-2778

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH730394860
<b>Licensee Name:</b>	Frankenmuth Glen ALC, LLC
<b>Licensee Address:</b>	3520 Davenport Avenue Saginaw, MI 48602
<b>Licensee Telephone #:</b>	(989) 892-0658
<b>Administrator/Authorized Representative:</b>	Andrea Flood
<b>Name of Facility:</b>	Covenant Glen Memory Care
<b>Facility Address:</b>	1130 Covenant Drive Frankenmuth, MI 48734
<b>Facility Telephone #:</b>	(989) 262-8340
<b>Original Issuance Date:</b>	04/01/2019
<b>Capacity:</b>	30
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 9/27/2022

Date of Bureau of Fire Services Inspection if applicable: 8/16/2022

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 9/27/2022

No. of staff interviewed and/or observed 4  
No. of residents interviewed and/or observed 10  
No. of others interviewed N/A Role

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication records(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain. Facility does not maintain resident funds
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  IR date/s: N/A
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s: SIR 2020A0784053
- Number of excluded employees followed up? 1 N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility was found to be in substantial compliance with the public health code and administrative rules regulating home for the aged facilities.

### IV. RECOMMENDATION

Renewal of the license is recommended.

*Aaron L. Clum*

9/27/2022

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Licensing Consultant

Date